

Working Healthy Changes

KEESM 2664.4(1), 2664.6

What happens when someone changes medical programs?

IL to WH

When an Independent Living consumer transitions to the Working Healthy program, the action that the EES worker takes depends on whether the consumer's previous Independent Living spenddown was met or unmet.

If the spenddown was met:

- The base period remains in tact and Working Healthy approval is postponed until the end of the base period.

If the spenddown was unmet:

- The base period is shortened to end the month prior to the month Working Healthy eligibility begins.
- The Benefits Specialist is added to the ADAD screen. If this is a WORK case, please add Nancy Scott to the ADAD screen. Her information is on page 7 of this manual.
- The Working Healthy code is entered on SEPA & PICK in the month Working Healthy begins.
- The premium is entered on MSID and the case is authorized.
- Remember if this is a WORK case, code LOTC.
- Appropriate notices are sent to the consumer and Benefits Specialist.

There are married households, with one person eligible for WH and one person remaining eligible for MS independent living. For these households, with unmet spenddowns, you set up a new case number for the WH member coded 'IN' and the spouse coded 'DI'.

On the old case number, with the remaining spouse, the spouse would be coded 'IN' and the Working healthy person would be coded 'DI' on SEPA.

Example: Mary and Tom have an open IL unmet spenddown case, with a base period from 1/01 - 6/30. On March 6, Tom wants to be in the WH program.

- Tom would have a new case number and be coded 'IN' with Mary coded 'DI'. The WH case would begin in April with one month bases.
- Mary would continue with the same case number and remain coded 'IN' and Tom would be coded 'DI' on this case in April. Mary's six month MS-IL base period remains from 1/01 - 6/30.

WH to IL

When a consumer transitions from Working Healthy to Independent Living, the six month base period will begin the month following the month Working Healthy ends. **If it is a WORK participant remember to change LOTC coding from WK/NA to IL/NA.**

Example: On Dec. 5, a Working Healthy consumer reports that the job is not working out and quits. The consumer does not want to continue on the WH program.

- Verify income and re-evaluate resources to make sure within resource eligibility limits.
- The Working Healthy code is removed from SEPA & PICK.
- The consumer is set up on a six month MS-IL base period beginning 1/1 through 6/30.
- Appropriate notices are sent to the consumer and Benefits Specialist.
- The next day remove the Benefits Specialist & Nancy Scott (WORK program manager from the ADAD screen.

There are married households, with one person on the WH program and one person eligible for MS independent living.

Example: Peggy has an open MS-IL case with a six month base period from 3/01 - 8/30. John, her husband, has an open WH case. On May 5, John decides the WH program is not for him.

- You close John's WH case effective 5/31. Send appropriate notices to John and Benefits Specialist.
- Change John's status on Peggy's case number effective 6/01 by coding John 'IN' instead of 'DI' on SEPA. Re-authorize June benefits and send appropriate notices.

Note: This may change the S/D status or amount of unmet S/D for base period 3/01 - 8/30 with the decrease in John's income.

WH to HCBS

When a consumer transitions from Working Healthy to the HCBS program, HCBS budgeting begins with the month of choice or assessment depending upon the waiver. **If WORK Participant, LOTC coding will change from WK/NA to HC/and code for waiver.**

Example: Jim, a consumer who started receiving Working Healthy, decides in July that the job is not working out for him and he would rather be on the HCBS program. An ES-3160 is received from the HCBS case manager on September 10th reflecting HCBS assessment for the PD waiver was September 9th and services will start September 16th.

- Verify income and re-evaluate resources to make sure within resource eligibility limits.
- HCBS budgeting begins in September since Jim was assessed for the PD waiver on the 9th.
- The program sub-type on SEPA would be changed from 'WH' to 'HC'.
- The Working Healthy PICK code would be removed.
- Any premium amount reflected on MSID would be removed.
- The HCBS obligation for September would be determined.
 - Since Jim might have already paid his September premium for WH, it should be allowed as a non covered expense on MEEX.
 - If there is no obligation to allow it against, the worker would have to contact the Benefits Specialist Manager via electronic mail, to refund the September premium to the consumer.
- HCBS information is coded on LOTC.
- Appropriate notices are sent to the consumer, case manager, and Benefits Specialist.
- The next day remove the Benefits Specialist & **Nancy Scott (WORK program manager from the ADAD screen.**

There are married households, with one person on the WH program and one person eligible for MS-IL. If Jim were married to June, the worker would also need to update June's case.

- Code Jim 'OU' instead of 'DI' on June's case effective September 1. You will also need to re-authorize Sept. benefits and send appropriate notices.

Note: This may change the S/D status or amount of unmet S/D for June's six month MS-IL base period.

Consumers may receive Working Healthy coverage while on a waiting list for HCBS.

HCBS to WH

When a consumer transitions from HCBS to the Working Healthy program, HCBS budgeting ends with the month services end and Working Healthy budgeting begins the following month.

Example: A consumer is receiving HCBS services on the PD waiver and decides to start working and take advantage of the Working Healthy program. An IM-3161 is received reflecting that HCBS services are ending September 16. The worker verifies the consumer's additional wages.

- LOTC is coded for Independent Living effective September 17.
- The Area Benefits Specialist is added to the ADAD screen. If this is a WORK case, add Nancy Scott to the ADAD screen. Her information is found on page 7 of this manual.
- The 'WH' sub-type is added to SEPA in the month of October.
- The appropriate Working Healthy PICK code is entered.
- The worker determines if the consumer will have a premium based on the new income information and enters it on MSID.
- **Remove HCBS coding from LOTC and replace with Independent Living coding or if this is a Working Healthy WORK participant LOTC coding will be WK/NA.**
- The case is authorized.
- Appropriate notices are sent to the consumer, case manager, and Area Benefits Specialist.

HCBS consumers who attempt to return to work under the Working Healthy program may need referred to Central Office they need to have the waiver process established if their attempt to go back to work fails.

There are married households, with one person on the WH program and one person eligible for MS-IL. If Scott, the HCBS to WH person, were married to Jenny, the worker would also need to:

- Code Jenny 'DI' on his WH case number effective Oct.1.

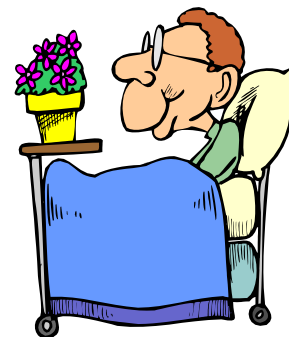
- Code Scott 'DI' instead of 'OU' on Jenny's case effective October 1. You will also need to re-authorize October benefits and send appropriate notices. This may change the S/D status or amount of unmet S/D for Jenny's six month MS-IL base period.

WH to Nursing Facility for a Temporary Stay

When a Working Healthy consumer enters a nursing facility for a temporary stay, they remain budgeted on the Working Healthy program as long as their nursing facility stay is expected to last no longer than the month of entrance and the following 2 months.

Example: A Working Healthy consumer enters a nursing facility 12/10 for rehabilitation services. The worker verifies that they stay is only expected to be 30 days.

- LOTC is coded using the 'TC' code.
- The consumer does not have an obligation to the nursing facility as they are responsible for any Working Healthy premium obligation during their temporary stay.
- An alert is set on WOAL to make sure the consumer is out of the nursing facility by 1/31.
- Appropriate notices are sent to the consumer, nursing facility, Benefits Specialist and **Nancy Scott (WORK program manager)**.



WH to Nursing Facility for a Permanent Stay

When a Working Healthy consumer enters a nursing facility, long term care budgeting begins the month following the month of entrance (except for Spousal Impoverishment cases).

Example: A Working Healthy consumer enters the nursing facility 12/10 for a long term stay.



- Verify income and re-evaluate resources to make sure within resource eligibility limits.
- LOTC is coded for nursing facility payment for December and the consumer does not have an obligation, since they are responsible for any Working Healthy premium due for December.
- The sub type on SEPA is changed from 'WH' to 'AC' in Jan.
- The Working Healthy PICK code is removed.
- Any premium amount reflected on MSID would be removed.
- The January nursing facility obligation is determined.
- The case is authorized.
- LOTC is updated with January's obligation amount.
- Appropriate notices are sent to the consumer, Benefits Specialist, **Nancy Scott (WORK program manager)** and nursing facility.
- The next day remove the Benefits Specialist from ADAD.
- If the consumer is married, the SEPA code is changed from 'DI' to 'OU' on the spouse's MS-IL case number.

Nursing Facility to WH

When a consumer leaves a nursing facility and is eligible for Working Healthy, budgeting under the Working Healthy provisions begin the month the consumer leaves the facility (except for Spousal Impoverishment cases).

Example: A consumer leaves the nursing facility 1/5 and returns to work. The consumer meets all criteria to receive Working Healthy coverage.

- The EES worker has to complete the retroactive patient liability process to reduce the last month's nursing home obligation to \$0.00.
- The '**AC**' code on SEPA is changed to '**WH**'.
- The appropriate Working Healthy PICK code is entered.
- The worker determines if the consumer will have a premium based on the new income information and enters it on MSID.
- The case is authorized.
- **LOTIC is updated from Nursing Facility to Independent Living coding or if a WORK participant coding is WK/NA.**
- The Area Benefits Specialist is added to the ADAD screen. Nancy Scott (WORK program manager) will be added to ADAD screen if this is a WORK participant. Her information can be found on page 7 of this manual.
- Appropriate notices are sent to the consumer, Benefits Specialist, and nursing facility.
 - If consumer is married, the SEPA code for the spouse is changed from "OU" to "DI" on the WH case number.
 - If the consumer is married, the SEPA code for the WH consumer is also changed from 'OU' to 'DI' on the spouse's MS-IL case number.

